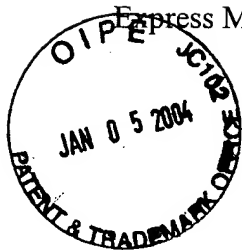


Express Mail Label No. EV331420173US

BUS-026166  
PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Scoggin et al.

:

Serial No.: 09/981,017

:

Art Unit: 2835

:

Filed: October 16, 2001

:

Examiner: Vortman, Anatoly

:

For: COMPACT FUSED  
DISCONNECT SWITCH

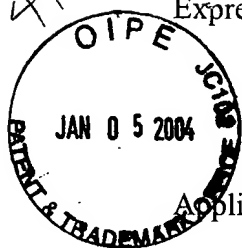
:

:

**AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In response to the Office Action dated October 10, 2003, please amend the above-identified application as follows:



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Scoggin et al.

Serial No.: 09/981,017

Filed: October 16, 2001

For: COMPACT FUSED DISCONNECT  
SWITCH

Group Art Unit: 2835

Examiner: Anatoly Vortman

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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TRANSMITTAL

- Transmitted herewith is:  
Amendment (13 pgs.), in response to Office Action dated October 10, 2003  
Amendment Transmittal Form (3 pgs.), in duplicate

STATUS

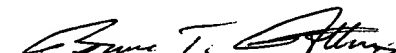
- Applicant  
☐ claims small entity status.  
☒ is other than a small entity.

CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER FOR PATENTS

Express Mail No. EV331420173US

Date: January 5, 2004

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Bruce T. Atkins, Reg. No. 43,476

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 420.00	\$ 210.00
<input type="checkbox"/> third month	\$ 950.00	\$ 475.00
<input type="checkbox"/> fourth month	\$1,480.00	\$ 740.00
<input type="checkbox"/> fifth month	\$2,010.00	\$1,005.00
	Fee Due	\$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

**OR**

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS		=	x \$43 = \$		x \$86 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145 = \$		+ \$290 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

**OR**

(b) ☐ Total additional fee for claims required \$

### FEE PAYMENT

5. \_\_\_\_\_ Attached is a check in the sum of \$\_\_\_\_\_

☐ Charge Deposit Account No. 01-2384 the sum of \$\_\_\_\_\_.  
A duplicate of this transmittal is attached.

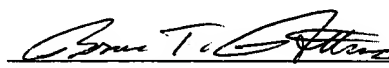
### FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:

  
 Bruce T. Atkins  
 Reg. No. 43,476  
 ARMSTRONG TEASDALE LLP  
 One Metropolitan Square, Suite 2600  
 St. Louis, MO 63102  
 314/621-5070